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Testimony of

Senator Donald E. Williams, Jr.  
Senate President Pro Tempore

On

Proposed Senate Bill 1046: An Act Subjecting Certain Department of Children and Families  
Facilities to Department of Public Health Licensure Requirements

Joint Committee on Public Health  
February 26, 2007

Senator Handley, Representative Sayers, and members of the committee, thank you for this opportunity to testify in support of Proposed Senate Bill 1046: *An Act Subjecting Certain Department of Children and Families Facilities to Department of Public Health Licensure Requirements*.

This bill simply requires that DCF-run facilities achieve licensure by the Department of Public Health. There are currently five such facilities—the Connecticut Juvenile Training School, Riverview Hospital, High Meadows, the Wilderness School and the Connecticut Children's Place (Connecticut General Statutes §17a-32). None of them is licensed nor subject to oversight by any state agency.

No licensure at all. Hundreds and hundreds of hospitals, mental health programs, after-school programs and other privately-run facilities and programs are licensed by the state. But our own state facilities treating our most vulnerable children go unlicensed. This is unacceptable: we must hold our state facilities—paid for entirely with taxpayer money—to at least the same standard as private facilities. We've all heard the reports, so, we know that, unfortunately, there are too many problems with these facilities. Requiring licensure by an independent state agency would force the state to address and correct these persistent problems.

One might ask: why not just have DCF license these facilities, the same way it licenses private programs? The reason is the built-in conflict of interest that would occur if DCF were the licenser, the administrator and the client of these children's facilities. In other words, if the licensure unit at DCF were to recommend additional staff at one of the facilities, it must do so knowing that the entire agency budget might be affected by such recommendations. If the licensure unit were to recommend disciplining or even closing one of the facilities, it must do so

knowing that other units within the same agency will be losing slots for the children in their care—the children in their care, who, by law, are entitled to receive treatment. There simply is not enough room for objectivity when one agency monitors itself.

As you well know, the Department of Public Health currently oversees the licensing of over 180,000 occupational licensees, chronic disease hospitals, daycare facilities, and youth camps, to name a few. This agency is professionally staffed and would provide the independent analysis and evaluation needed when reviewing DCF facilities.

This is a commonsense and long overdue initiative. It will provide the same oversight to our state-run facilities that we expect from all the other facilities and programs that treat children in our state. I would ask that, when this bill is drafted, Riverview Hospital be added to the bill. Its inclusion is critical both to the intent of the legislation and to improving care provided to children with emotional problems in our state.

I ask for your support of this proposal and I look forward to working with you this session to ensure its passage. Thank you.